CITY OF SEAL BEACH

Boards - Commissions - Committees Application

Name:					
Address:					
Phone Number:		Cell Phone:			
Email Address:					
Who is your Council rep	oresentative?			_	
Please check the areas	of interest:				
Community & Recreation		Environmental Issues			
Building & Planning Issues			Public Safety Issues		
Beach & Water Quality			Infrastructure Issues		
Other: Please b	oriefly describe:			_	
•	,	•	ience and/or education th nmission, or committee:	a	
	_		Signature		
This application will ke	pt on file in the Office	e of the City (Clerk for a period of 2 years.		
	(Office Us	e Only)			
Date received:	Received	Ву:	District No		